

Attorney Docket No.: 451194-095

## **DECLARATION**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named below) of the invention entitled:

## CONTROLLED RELEASE POTASSIUM CHLORIDE TABLETS

described and claimed

X	in the attached specification;
	in the specification filed
<del></del>	as U.S. Application Serial No.
	and as amended

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as filed and as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

Send Correspondence To:

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Direct Telephone Calls To:

Mark P. Levy, Esq. (937) 443-6949

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Docket No. 451194-095 Declaration

Full name of sole or first Inventor – Gopi Venkates
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Inventor's Signature _			
Date:	<del></del>		
Residence: Citizenship:	780 Waldsmith Way, Vandalia, OH 45377 U.S.		
Post Office Address:	780 Waldsmith Way, Vandalia, OH 45377		
Full name of second I	nventor – Craig Kramer		
Inventor's Signature			
Date:			
Citizenship:	<ul><li>220 Grantwood Drive, West Carrollton, OH 45449</li><li>U.S.</li><li>220 Grantwood Drive, West Carrollton, OH 45449</li></ul>		
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